

DEC 15 2004

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To:

NAME:	FACSIMILE:
U.S. Patent and Trademark Office	(703) 872-9306

FROM: Michael R. Ward – Reg. No. 38, 651**DATE:** December 15, 2004**NUMBER OF PAGES WITH COVER PAGE: 17**Preparer of this slip has confirmed that facsimile number given is correct: MRW1/8693**CAUTION - CONFIDENTIAL**

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Re: U.S. Patent Application Serial No. 10/646,070
For: CONTROL OF GENE EXPRESSION
By: Michael W. GRAHAM et al.
Art Unit: 1636
Examiner: D.M. Sullivan
Our reference: 54632-20003.03

Papers attached herewith:

1. Transmittal (1 page)
2. Fee Transmittal PTO-SB/17 (1 pg IN DUPL)
3. One Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
4. Response to Restriction Requirement of 10/15/04 (12 pages)
5. This fax cover sheet (1 page)

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DEC 15 2004

PTO/SB/21 (09-04)

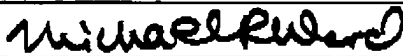
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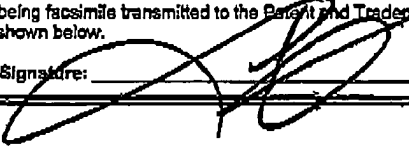
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/646,070	
	Filing Date	August 22, 2003	
	First Named Inventor	Michael W. GRAHAM	
	Art Unit	1836	
	Examiner Name	D. M. Sullivan	
Total Number of Pages In This Submission	16	Attorney Docket Number	546322000303

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form 1 pg IN DUPL <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply to Restriction Requirement of 10/15/04 - 12 pgs <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request - 1 pg <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): VIA FACSIMILE
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		CUSTOMER NO. 20872
Signature			
Printed name	Michael R. Ward		
Date	December 15, 2004	Reg. No.	38,651


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sf-1836291

PTO/SB/17 (12-04)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known		
FEE TRANSMITTAL for FY 2005				Application Number	10/646,070	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				Filing Date	August 22, 2003	
				First Named	Michael W. GRAHAM	
				Examiner Name	D. M. Sullivan	
				Art Unit	1636	
TOTAL AMOUNT OF PAYMENT (\$)				120.00	Attorney Docket No.	548322000303
METHOD OF PAYMENT (check all that apply)						
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____						
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>03-1952</u> Deposit Account Name: <u>Morrison & Foerster LLP</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)						
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee						
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) <input checked="" type="checkbox"/> Credit any overpayments under 37 CFR 1.16 and 1.17						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
FEE CALCULATION						
1. BASIC FILING, SEARCH, AND EXAMINATION FEES						
FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)	
Utility	300	150	500	250	100	
Design	200	100	100	50	65	
Plant	200	100	300	150	80	
Reissue	300	150	500	250	300	
Provisional	200	100	0	0	0	
2. EXCESS CLAIM FEES						
Fee Description Fee (\$) Small Entity Fee (\$)						
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent					50 25	
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent					200 100	
Multiple dependent claims					360 180	
Total Claims	59	59 or HP	Extra Claims	-0-	X	
			Fee (\$)	-0-	=	
			Fee Paid (\$)	-0-		
HP + highest number of total claims paid for, if greater than 20						
Indep. Claims	3	-3 or HP	Extra Claims	-0-	X	
			Fee (\$)	-0-	=	
			Fee Paid (\$)	-0-		
HP + highest number of independent claims paid for, if greater than 3						
3. APPLICATION SIZE FEE						
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or reaction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
Total Sheets	-0-	Extra Sheets	-0-	Number of each additional 50 or fraction thereof	-0-	
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					Fee Paid (\$)	
4. OTHER FEE(S)						
Non-English Specification, \$130 fee (no small entity discount)						
Other: EXTENSION OF TIME					\$120.00	
SUBMITTED BY MORRISON & FOERSTER LLP CUSTOMER NO. 20872						
Signature			Registration No. (Attorney/Agent)	38,651	Telephone	
Name (Print/Type)	MICHAEL R. WARD		Date	December 15, 2004		

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Dated: 12/15/04 Signature: [Signature]
(Lilia Green)

DEC 15 2004
Docket No.: 546322000303
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Michael W. GRAHAM et al.

Application No.: 10/646,070

Group Art Unit: 1636

Filed: August 22, 2003

Examiner: D. M. Sullivan

For: CONTROL OF GENE EXPRESSION

RESPONSE TO RESTRICTION REQUIREMENT

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

This is in response to the restriction requirement set forth in the Office Action mailed October 15, 2004, (Paper No. 1004), for which a response was due on November 15, 2004. Applicants include a Petition for a one month extension of time with this response to extend the deadline to respond to this Office Action until December 15, 2004. As such, this response is timely filed.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 11 of this paper.

sf-1818175